

09-19-00

**UTILITY
PATENT APPLICATION
TRANSMITTAL**

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.	36.P282
First Named Inventor or Application Identifier	
Hung Huang	
Express Mail Label No.	EL714839482US

A
JCS 93/64550 PRO
09/18/00

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

1. Fee Transmittal Form
(Submit an original, and a duplicate for fee processing)
2. Specification Total Pages **53**
3. Drawing(s) (35 USC 113) Total Sheets **13**
4. Patent Application Bibliographic Data Sheet Total Sheets

ADDRESS TO:

Commissioner for Patents
Box Patent Application
Washington, DC 20231

7. Microfiche Computer Program (Appendix)
8. Nucleotide and/or Amino Acid Sequence Submission
(if applicable, all necessary)
 - a. Computer Readable Copy
 - b. Paper Copy (identical to computer copy)
 - c. Statement verifying identity of above copies

9. Oath or Declaration Total Pages **2**
 - a. Newly executed (original or copy)
 - b. Unexecuted for information purposes
 - c. Copy from a prior application (37 CFR 1.63(d))
(for continuation/divisional with Box 18 completed)
[Note Box 6 below]
- i. **DELETION OF INVENTOR(S)**
Signed Statement attached deleting inventor(s)
named in the prior application, see 37 CFR
1.63(d)(2) and 1.33(b).
- Incorporation By Reference (useable if Box 5c is checked).

Express Mail™ mailing label number **EL714839482US**

Date of Deposit **September 18, 2000**

I hereby certify that this paper or fee is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to the Commissioner of Patents and Trademarks, Washington, D.C. 20231.

Dennis A. Duchene, Reg. No. 40,595
(Typed or printed name of person mailing paper or fee)

D. Duchene

18. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information:

Continuation Divisional Continuation-in-part (CIP) of prior application No. / _____
Prior application information: Examiner _____ Group/Art Unit: _____

19. CORRESPONDENCE ADDRESS

<input checked="" type="checkbox"/> Customer Number or Bar Code Label	05514 (Insert Customer No. or Attach bar code label here)		or <input type="checkbox"/> Correspondence address below
NAME			
Address			
City	State	Zip Code	
Country	Telephone	Fax	

CLAIMS	(1) FOR	(2) NUMBER FILED	(3) NUMBER EXTRA	(4) RATE	(5) CALCULATIONS
	TOTAL CLAIMS (37 CFR 1.16(c))	96-20 =	76	X \$ 18.00 =	\$ 1,368.00
	INDEPENDENT CLAIMS (37 CFR 1.16(b))	5-3 =	2	X \$ 78.00 =	\$ 156.00
	MULTIPLE DEPENDENT CLAIMS (if applicable) (37 CFR 1.16(d))			\$260.00 =	\$ 260.00
				BASIC FEE (37 CFR 1.16(a))	\$ 690.00
				Total of above Calculations =	\$ 2,474.00
	Reduction by 50% for filing by small entity (Note 37 CFR 1.9, 1.27, 1.28).				
				TOTAL =	\$ 2,474.00

20. Small entity status

- a. A small entity statement is enclosed
- b. A small entity statement was filed in the prior nonprovisional application and such status is still proper and desired.
- c. Is no longer claimed.

21. A check in the amount of \$ 2,474.00 to cover the filing fee is enclosed.

22. A check in the amount of \$ _____ to cover the recordal fee is enclosed.

23. The Commissioner is hereby authorized to credit overpayments or charge the following fees to Deposit Account No. 06-1205:

- a. Fees required under 37 CFR 1.16.
- b. Fees required under 37 CFR 1.17.
- c. Fees required under 37 CFR 1.18.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED

NAME	Dennis A. Duchene, Reg. No. 40,595
------	------------------------------------

SIGNATURE	
-----------	--

DATE	September 18, 2000
------	--------------------